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CONFIRMATION NO. 9449

SERIAL NUMBER 10/723,140	FILING DATE 11/25/2003  RULE	CLASS 514	GROUP ART UNIT 1626	ATTORNEY DOCKET NO. PC30246J
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of 10/330,846 12/27/2002 ABN  
 which is a CON of 10/106,228 03/27/2002 ABN  
 which is a CON of 09/781,896 02/12/2001 PAT 6,417,230  
 which is a CON of 09/307,813 05/10/1999 PAT 6,187,813 JK  
 which is a CON of 08/461,341 06/05/1995 ABN  
 which is a DIV of 07/986,943 12/08/1992 PAT 5,422,368  
 which is a CON of 07/469,442 04/10/1990 ABN

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

SWEDEN 8803110-9 09/06/1988 JK  
 SWEDEN 8803855-9 10/28/1988

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 03/11/2004

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature: <i>Joseph Borack</i> Initials: JK	SWEDEN	0	15	9

## ADDRESS

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## TITLE

Prostaglandin derivatives for the treatment of glaucoma or ocular hypertension

<p>FILING FEE RECEIVED 1416</p>	<p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p>	<table border="1"><tr><td><input type="checkbox"/> All Fees</td></tr><tr><td><input type="checkbox"/> 1.16 Fees ( Filing )</td></tr><tr><td><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )</td></tr><tr><td><input type="checkbox"/> 1.18 Fees ( Issue )</td></tr><tr><td><input type="checkbox"/> Other _____</td></tr><tr><td><input type="checkbox"/> Credit</td></tr></table>	<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees ( Filing )	<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )	<input type="checkbox"/> 1.18 Fees ( Issue )	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
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